

BOROUGH OF ORWIGSBURG UNIFORM CONSTRUCTION PERMIT APPLICATION

LOCATION OF PROPOSED WORK OR IMPROVEMENT

Site Address: _____

Tax Parcel # _____ Lot # _____

Subdivision/Land Development: _____ Phase: _____ Section: _____

Owner: _____ Phone # _____ Fax # _____

Mailing Address: _____

E-Mail: _____

Principal Contractor: _____ Phone# _____ Fax# _____

Mailing Address: _____

E-Mail _____

Architect: _____

Phone# _____ Fax# _____

Mailing Address: _____

E-Mail: _____

TYPE OF WORK OR IMPROVEMENT (Check One)

- New Building Addition Alteration Repair Demolition Relocation
 Foundation Only Change of Use Plumbing Mechanical Electrical

Describe the proposed work:

ESTIMATED COST OF CONSTRUCTION (reasonable fair market value)

\$ _____

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Vice President
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DESCRIPTION OF BUILDING USE (Check One)

RESIDENTIAL

- One-Family Dwelling (R-3)
- Two-Family Dwelling (R-3)

NON-RESIDENTIAL

Specific Use: _____
 Use Group: _____
 Change in Use: YES NO
 If YES, Indicate Former: _____
 Maximum Occupancy Load: _____
 Maximum Live Load: _____

BUILDING/SITE CHARACTERISTICS

Number of Residential Dwelling Units: _____ Existing _____ Proposed

Mechanical:

Indicate Type of Heating/Ventilating/Air Conditioning (i.e., electric, gas, oil, etc.) _____

Water Service: (Check) Public Private

Sewer Service: (Check) Public Private (Septic Permit # _____)

Does or will your building contain any of the following:

Fireplace(s): Number _____ Type of Fuel _____ Type Vent _____

Elevator/Escalators/Lifts/Moving walks: (Check) YES NO

Sprinkler System: YES NO

Pressure Vessels: YES NO

Refrigeration Systems: YES NO

BUILDING DIMENSIONS

Existing Building Area: _____ sq. ft. Number Of Stories: _____
 Proposed Building Area: _____ sq. ft. Height of Structure Above Grade: _____ ft.
 Total Building Area: _____ sq. ft. Area of the Largest Floor: _____ sq. ft.

FLOODPLAIN

Is the site located within an identified flood hazard area? (Check One) YES NO

Will any portion of the flood hazard area be developed? (Check One) YES NO N/A

Owner/Agent shall verify that any proposed construction and/or development activity complies with the requirements of the National Flood Insurance Program and the Pennsylvania Flood Plain Management Act (Act 166-1978), specifically *Section 60.3*.

Lowest Floor Level: _____

HISTORIC DISTRICT

Is the site located within a Historic District? YES NO

If construction is proposed within a Historic District, a certificate of appropriateness may be required by the Borough.

The applicant certifies that all information on this application is correct and the work will be completed in accordance with the approved construction documents and PA Act 45 (Uniform Construction Code) and any additional approved building code requirements adopted by the Municipality. The property owner and applicant assumes the responsibility of locating all property lines, setback lines, easements, rights-of way, flood areas, etc. Issuance of a permit and approval of construction documents shall not be construed as authority to violate, cancel or set aside any provisions of the codes or ordinances of the Municipality or any other governing body. The applicant certifies he/she understands all the applicable codes, ordinances and regulations. Application for a permit shall be

made by the owner or lessee of the building or structure, or agent of either or by the registered design professional employed in connection with the proposed work.

I certify that the code administrator or the code administrator's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

Signature of Owner or Authorized Agent

Print Name of Owner or Authorized Agent

Date

Directions to Site:

(FOR CODE ADMINISTRATOR USE ONLY)

ADDITIONAL PERMITS/APPROVALS REQUIRED

<input type="checkbox"/> STREET CUT/DRIVEWAY	APPROVED _____
<input type="checkbox"/> CUT AND FILL	APPROVED _____
<input type="checkbox"/> PENNDOT HIGHWAY OCCUPANCY	APPROVED _____
<input type="checkbox"/> DEP FLOODWAY OR FLOODPLAIN	APPROVED _____
<input type="checkbox"/> SEWER CONNECTION	APPROVED _____
<input type="checkbox"/> ON-LOT SEPTIC	APPROVED _____
<input type="checkbox"/> ZONING	APPROVED _____
<input type="checkbox"/> HARB	APPROVED _____
<input type="checkbox"/> OTHER _____	APPROVED _____

APPROVALS

BUILDING PERMIT DENIED:	Date _____	Date Returned _____
BUILDING PERMIT APPROVED:	Date _____	
CODEADMINISTRATOR _____		
Date Issued _____	Date Expires _____	PERMIT # _____
BUILDING PERMIT FEE	\$ _____	RECEIPT # _____
PLUMBING PERMIT (if app.)	_____	RECEIPT # _____
MECHANICAL PERMIT (if app.)	_____	RECEIPT # _____

ELECTRICAL PERMIT (if app.) _____

RECEIPT # _____

PROJECT DOCUMENTS (DRAWINGS & CALCULATIONS)

Type of document:	Submitted	Signed & Sealed	Date:	Revision Date:
Foundation Plans	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Construction Drawings	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Electrical Drawings	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Mechanical Drawings	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Plumbing Drawings	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Specifications	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Flood Hazard Area Data	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Workers Comp. Certificate	<input type="checkbox"/> Yes <input type="checkbox"/> No		_____	_____

DATE STAMP:

ORWIGSBURG BOROUGH - UCC PERMIT FEE SCHEDULE

The following permit fee schedule establishes the base permit fees for all types of construction permits. A 5% municipal administration fee must be added to all base fees listed below. A \$4.00 State administration fee must also be added to each construction project.

Mechanical & Plumbing:

All appliances and fixtures including, but not limited to sinks, water closet, bath tub, shower, washing machine, hose bibb, floor drain, dish washer, drinking fountain, water heater, air handlers and any fuel burning device (gas, oil, wood, or coal)

Per appliance or fixture ----- \$15.00

Utility service connections (water or sewer), boiler, grease traps, sewer pumps, refrigeration units , water cooled air conditioners, etc.

Per appliance -----\$55.00

Minimum Fee \$80.00

Building Fee Schedule

Residential

New Construction.....\$55.00 plus .20 per sq. foot of GFA*

Additions.....\$55.00 plus .20 per sq. foot of GFA*

Alterations & repairs.....2.2% of construction cost w/ a maximum cost of \$55,000.00. Any additional inspections which may be required due to the scope of the work will be negotiated with the applicant during the plan review process and prior to the issuance of a permit.

Demolition\$80.00

Utility & miscellaneous use groups.....1.80% of construction cost
(sheds, decks, fences, pools, towers, concrete slabs, retaining walls etc.)

Minimum fee.....\$80.00

MANUFACTURED HOMES

\$400.00

All use groups other than Residential

New Construction & additions.....\$80.00 plus .27 per sq. foot of GFA*

Alterations.....2.75% of construction cost w/ a maximum cost of \$80,000.00. Any additional inspections which may be required due to the scope of the work will be negotiated with the applicant during the plan review process and prior to the issuance of a permit.

Demolition.....\$0.01 per sq. ft. (\$160.00 Minimum)

Signs.....\$80.00 plus \$2.50 per sq. ft.

Minimum fee.....\$80.00

*GFA - Gross floor area defined as the total square footage of all floors thin the perimeter of the outside walls, including basements, cellars, garages, roofed patios, breezeways, covered walkways and attics with floor to ceiling height of 6'6" of more.

Electrical Fee Schedule

Service and Feeders

200 AMP or less.....\$80.00
201 AMP to 400 AMP..... \$80.00
Over 400 AMP.....\$20.00 per 100 Amp
Sub-feeders or Sub-panels..... 1/4 of above fees
Over 600 volts..... double above fees

Residential Flat Rate Inspections

2 trip maximum
100 Amp service and max 100 devices.....\$80.00
200 Amp service and max 200 devices.....\$115.00
over above limits use individual fee calculations
Modular/Mobile homes, 1 trip, service & feeder.....\$80.00
Minor Alterations and Service
max 15 devices.....\$80.00

Rough Wire

All switches receptacles and lighting outlets
1 to 25.....\$20.00
each additional 10.....\$10.00

Finished Wiring

All switches, receptacles and lighting outlets
1 to 25.....\$20.00
each additional 10.....\$10.00

Heating, Cooling, Cooking, Appliances, Equipment

Motors, Generators, Transformers, Capacitors, Etc.

less than 1/3 hp, kw, kva use finished wiring fee
over 1/3 hp, kw, kva
1/3 to 1.0.....\$15.00
1.1 to 5.0.....\$20.00
5.1 to 10.0.....\$20.00
10.1 to 30.0.....\$25.00
30.1 to 50.0.....\$30.00
50.1 to 100.0.....\$35.00
over 100 @ \$1.00 per hp, kv, kva
over 600 volts, 2x above fees

Signaling, Communication and Alarm Systems

1 to 10 devices.....\$45.00
each additional device.....\$1.50

Minimum Fee.....\$80.00

Fire: All use groups except one and two family

Sprinklers.....\$55.00 plus \$0.25 per sprinkler head
Standpipe..... \$95.00 Each
Wet/Dry/Carbon Dioxide.....\$125.00 up to 100lbs. (\$0.075 each pound over)
Commercial Cooking System.....\$175.00 per system (hood, duct & suppression)

Plan Review Fee Schedule

For Buildings with an estimated construction value up to \$3,000,000.00 the Building Plan Review fee is: 0.0013 of the estimated value. (\$275.00 Minimum)

For Buildings with an estimated construction value over \$3,000,000.00 up to \$6,000,000.00 the Building Plan Review fee is: \$3,950.00 plus 0.0005 of the estimated value over \$3,000,000.00

For Buildings over \$6,000,000.00 the fee is: \$5,450.00 plus 0.0004 of the valuation over \$6,000,000.00

The Plan Review Fee for: Electrical, Mechanical and Plumbing are computed at 30% of the Building Plan Review fee for each discipline (\$255.00 Minimum)

Plan Submission Requirements

All construction and site plans must be included with submittals and shall include a copy of all plans in an electronic format. Submittals not accompanied by electronic format construction and site plans will be required to pay the cost associated with scanning the paper documents.

Commencing Activities Prior to the Issuance of Permits or Submittal of Plans

Activities commenced prior to the issuance of permits or submittal of plans required by Orwigsburg Borough pursuant to the Pennsylvania Uniform Construction Code shall be subject to a sixty percent (60%) administrative fee.

Re-Inspections

All other inspections and re-inspections not listed will be invoiced to the property owner/contractor at the rate of \$80.00/hour.

Construction Not Covered Above

Any construction, not specifically sited above, requiring a permit and inspection shall be associated with the closest specific construction type indicated.

Application for Permit for Water Connection

Application No. _____

Date: _____

Borough of Orwigsburg
209 N. Warren St., P.O. Box 128
Orwigsburg, PA 17961
Phone: (570) 366-3103 Fax: (570) 366-3106

The undersigned hereby makes applications for a permit to construct and connect a Building Service from the herein designated property to the water system of the Borough of Orwigsburg. The Borough is requested to provide a service line to this property.

Property Location: _____
street address or other identification

Property Owner: _____
name
_____ address

Type of Connection: (check type)

(A) Domestic

(1) Single Dwelling Unit ()

(2) Multiple Unit () No. of Units _____
(apartments, etc.)

(B) Commercial

(1) Store, etc. ()

(2) Apartment Adjoining () No. of Units _____

(3) Office () No. of Units _____

(4) Professional () Type _____

(C) Industrial ()

Description of facility: _____

Number of Employees: _____

(D) Institutional Type: _____ No. of Occupants _____

(E) Size of service line requested: _____ inches

(F) Service required on or about _____ (date).

Signed: _____
Authorized Agent or Owner

Fee Received \$ _____ By: _____

Application for Permit for Sewer Connection

Application No. _____

Date: _____

Borough of Orwigsburg
209 N. Warren St., P.O. Box 128
Orwigsburg, PA 17961
Phone: (570) 366-3103 Fax: (570) 366-3106

The undersigned hereby makes applications for a permit to construct and connect a sanitary sewer from the herein designated property to the sewage collection system of the Municipal Authority of the Borough of Orwigsburg.

Property Location: _____
street address or other identification

Property Owner: _____
name
_____ address

Type of Connection: (check type)

- (A) Domestic
 - (1) Single Dwelling Unit ()
 - (2) Multiple Unit () No. of Units _____
(apartments, etc.)
- (B) Commercial
 - (1) Store, etc. ()
 - (2) Apartment Adjoining () No. of Units _____
 - (3) Office () No. of Units _____
 - (4) Professional () Type _____
- (C) Industrial ()

Description of facility: _____

Number of Employees: _____

(D) Institutional Type: _____ No. of Occupants _____

Signed: _____
Authorized Agent or Owner

Fee Received \$ _____ By: _____

BOROUGH OF ORWIGSBURG
Building and Zoning Permits Department
Municipal Building
P.O. BOX 128, 209 N. WARREN STREET
ORWIGSBURG, PA 17961

Telephone: (570) 366-9534

Tom Yashinsky, BCO

PLAN SUBMISSION REQUIREMENTS FOR NEW CONSTRUCTION

1. The three (3) sets of plans and specifications signed and sealed by the designer must be provided along with the completed permit applications.
2. **Site plans must show building footprint and distances from lot lines, street right-of-ways and finished grades.**

Building Plans

- Front, rear and side elevations
- Footing/foundation diagram
- Garage/living area separation walls
- Window and Door schedule
- Design loads and design calculations
- Location of smoke and/or heat detectors
- "R" value of wall and ceiling insulation

Plumbing Plans

- Connection details based on Township Codes
- Isometric diagram of water supply system with fixtures, locations and water supply fixture units (WSFU) values
- Isometric diagram of sewage collection system with fixtures, location and value

Mechanical Plans

- Location and equipment size
- Air distribution and return system
- Ventilation and exhaust
- Combustion air requirements for all new appliances
- Gas piping diagram

Electrical Plans

- Location of all devices including lighting, receptacles, switches appliances, transformers, panels and sub panels
- Size and type conductors
- Panel and sub panel schedule

Home owners are permitted to draw their own plans. All plans must be to scale.

**BOROUGH OF
ORWIGSBURG**

P.O. BOX 128, 209 N. WARREN ST.
ORWIGSBURG, PA 17961

570.366.3103
FAX 570.366.3106

Water Conservation
Low Flow Fixtures Certification

I hereby certify that the water fixtures installed at the address listed below are in conformance with the following:

Name: _____
Address: _____
Date: _____

Fixtures and Fittings

Article 1 – Water Closets and Associated Flushing Mechanisms

The water consumption of water closets shall not exceed an average of 1.6 gallons per flush cycle over a range of test pressures from 20 to 80 psi.

Article 2 – Urinals and Associated Flushing Mechanisms

Urinal water consumption shall not exceed an average of 1.5 gallons per flush cycle over a range of test pressures from 20 to 80 psi.

Article 3 – Showerheads

Showerhead discharge rates shall not exceed 3.0 gallons of water per minute over a range of test pressures from 20 to 80 psi.

Article 4 – Faucets

Sink and lavatory faucet discharge rates shall not exceed 3.0 gallons of water per minute over a range of test pressures from 20 to 80 psi.

* This form must be notarized.

**BOROUGH OF
ORWIGSBURG**

P.O. BOX 128, 209 N. WARREN ST.
ORWIGSBURG, PA 17961

570.366.3103
FAX 570.366.3106

Workmen's Compensation Affidavit

I _____, do solemnly swear that I will not employ/hire any other persons for the project for which I am seeking a building permit.

After receipt of the building permit, if I employ any other persons I must notify the Borough office and provide proof of workers' compensation coverage within three (3) working days.

I understand that failure to comply will result in stop work order and that such order may not be lifted until proper coverage is obtained, as provided by Section 302(e)(4) of the act of June 2, 1915 (P.L. 736), known as The Pennsylvania Worker's Compensation Act, reenacted and amended June 21, 1939 and amended December 5, 1974 and amended July 2, 1993.

Name: _____

Address: _____

Phone #: _____

Subscribed and sworn to me before this _____ day of _____.

Signature of Notary Public

My Commission Expires

**BOROUGH OF
ORWIGSBURG**

P.O. BOX 128, 209 N. WARREN ST.
ORWIGSBURG, PA 17961

570.366.3103
FAX 570.366.3106

Contractor's Workmen's Compensation Affidavit

I _____ trading as _____
do not employ any individuals. I work by myself; I understand that I shall not
subcontract all or any part of a contract in Orwigsburg unless the subcontractor
has presented proof of insurance or filed an affidavit.

Federal of State Employee Identification Number _____

Company Name: _____

Name: _____

Address: _____

Phone #: _____

Subscribed and sworn to me before this _____ day of

_____.

Signature of Notary Public

My Commission Expires